

PHOENIX OFFICE  
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PHOENIX, ARIZONA 85007  
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AZ Toll-free (888) 271-9286



TUCSON OFFICE:  
400 WEST CONGRESS  
TUCSON AZ 85701  
(520) 628-6345

## ARIZONA REGISTRAR *of* CONTRACTORS

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*Janet Napolitano, Governor*

*Israel G. Torres, Director*

### INSTRUCTIONS FOR FILING CRIMINAL RECORD DISCLOSURE FORMS

The licensing application for a contractor's license requires all felony convictions to be disclosed prior to any license being issued by this agency.

Please use only **black ink** when filling out the forms. Please complete the form including your address and all telephone numbers where you may be contacted. List the date of each arrest and/or the date of conviction. List the state and county, if possible, where each arrest took place, and most important, the jurisdiction of the court (County, State, U.S. Federal Court), Superior or District court and the location of the court.

Sign the **Authorization to Release Criminal Records** form and have it notarized. Obtain **two** fingerprint cards from the R.O.C. or your local law enforcement agency and complete the requested information with the exception of your name, employer, and employer's address and reason fingerprinted. The R.O.C. will complete these areas. When filling out your print cards, enter your pertinent physical information. You must be fingerprinted by a law enforcement agency or the R.O.C. Phoenix office and ensure the person fingerprinting you signs and dates both fingerprint cards. **You** must also sign the cards.

Upon submitting the forms and fingerprint cards, include a cashier's check or money order in the amount of \$29.00 dollars, made payable to the Registrar of Contractors with a memo notation of D.P.S., which is the processing fee that has been set by the Arizona Department of Public Safety as per A.R.S. §41-1750(J). This fee must be included with your documents even if you have been charged by another agency that takes your fingerprints.

An appointment is required to have your fingerprints taken in the Phoenix office. To schedule an appointment, or should you have any questions, please contact the Duty Investigator at 602-542-1525 or outside of Maricopa County at 888-271-9286.

## CRIMINAL RECORDS DISCLOSURE FORM

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: HOME \_\_\_\_\_ WORK \_\_\_\_\_ CELL \_\_\_\_\_ OTHER \_\_\_\_\_

\*\*\*\*\*

**Please read the following carefully.**

Have you ever been convicted of a felony? The fact that you entered into a plea bargain and pled "no contest", or that your conviction has now been vacated, pardoned, expunged, dismissed, appealed or reduced to a misdemeanor, or that you now have your Civil Right restored does not mean you can answer the question "**no.**" Answer "**yes**" if you have had a felony conviction.

YES \_\_\_\_\_ NO \_\_\_\_\_

Have you ever been convicted of any crime, which requires you to **REGISTER AS A SEX OFFENDER**?

YES \_\_\_\_\_ NO \_\_\_\_\_

\*\*\*\*\*

Please list all felony convictions, starting with the most recent. Use additional sheets if necessary. A conviction will not automatically prevent you from obtaining a contractor's license, but failure to disclose a conviction can result in a license denial or revocation of the license after issuance. You may also be subject of a criminal investigation and prosecution should you falsify a license application.

\*\*\*\*\*

**1. What were you originally arrested for? (List all charges that were from the same arrest incident.)**

**(A). Arrest #1 and date:** \_\_\_\_\_

**Give a brief summary of the circumstances of the arrest.** \_\_\_\_\_

\_\_\_\_\_

**(B). What were you convicted of?** \_\_\_\_\_

**(C). Check the Jurisdiction and the County of the court where the conviction took place.**

Superior Court in Arizona \_\_\_\_\_ U. S. Federal Court in Arizona \_\_\_\_\_ County \_\_\_\_\_

**Circle the appropriate court: Superior, District, or Circuit Court; in what state?** \_\_\_\_\_

**Name, address and county of the sentencing court for this conviction.** \_\_\_\_\_

\_\_\_\_\_

**(D). What sentence did you receive on the above charge? Prison Term** \_\_\_\_\_

**Jail Term** \_\_\_\_\_, **or Probation Time** \_\_\_\_\_

**(E). Date released from, or date you will be released from, probation or parole.** \_\_\_\_\_

2. What were you originally arrested for? (List all charges that were from the same arrest incident.)

(A). Arrest #2 and date: \_\_\_\_\_

Give a brief summary of the circumstances of the arrest. \_\_\_\_\_

\_\_\_\_\_

(B). What were you convicted of? \_\_\_\_\_

(C). Check the Jurisdiction and the County of the court where the conviction took place.

Superior Court in Arizona \_\_\_\_\_ U.S. Federal Court in Arizona \_\_\_\_\_ County \_\_\_\_\_

Circle the appropriate court: Superior, District, or Circuit Court; in what state? \_\_\_\_\_

Name, address and county of sentencing court for this conviction. \_\_\_\_\_

\_\_\_\_\_

(D). What sentence did you receive on the above charge? Prison Term \_\_\_\_\_  
Jail Term \_\_\_\_\_, or Probation Time \_\_\_\_\_

(E). Date released from/or date you will be released from probation or parole \_\_\_\_\_

3. Please list any other felony convictions, with all information as required above.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Have you ever held, or been a part of any contractor's license in Arizona? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please list the license number and business name, if applicable. \_\_\_\_\_

\_\_\_\_\_

5. Check if you are currently on Probation \_\_\_\_\_ Parole \_\_\_\_\_ Registered Sex Offender \_\_\_\_\_

(A). Date released from, or date you will be released from, probation or parole. \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

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### AUTHORIZATION TO RELEASE CRIMINAL RECORDS

I, \_\_\_\_\_, hereby authorize  
First Middle (no initials) Last

the Registrar of Contractors, or his agent, to examine or receive a copy of any record maintained by the UNITED STATES ARMED FORCES, any GOVERNMENTAL BODY, LAW ENFORCEMENT AGENCY, UNIVERSITY, COLLEGE OR BOARD OF EDUCATION of any STATE, or any BANK or CREDIT AGENCY relating to me, in the same manner and to the same extent as if I personally applied for the same, and I hereby authorize such records to be disclosed or furnished with any request made on behalf of the Registrar of Contractors or his agent.

Date of birth: \_\_\_\_\_  
Month Day Year

Place of birth: \_\_\_\_\_  
City State

Social Security Number: \_\_\_\_\_

\_\_\_\_\_  
Signature

STATE OF \_\_\_\_\_ )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

My commission expires \_\_\_\_\_

Revised 1/2003

Visit our Website at <http://www.azroc.gov>